

JUN 13 2005

PTO/SB/22 (12-04)

Approved for use through 7/31/2006. OMB 0851-0031  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).)		<b>Docket Number (Optional)</b> 532792000610	
<b>Application Number</b> 09/992,901		<b>Filed</b> November 14, 2001	
<b>For</b> GENETICALLY MODIFIED PLANTS HAVING MODULATED BRASSINOSTEROID SIGNALING			
<b>Art Unit</b> 1638		<b>Examiner</b> G. Collins	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	<b>Fee</b> \$120	<b>Small Entity Fee</b> \$80
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to		
	Deposit Account Number	03-1852	I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number 38,661	
	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	
	Signature <u>Michael R. Ward</u>		Date <u>June 13, 2005</u>
	Typed or printed name <u>Michael R. Ward</u>		Telephone Number <u>415/268-6237</u>
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/>	Total of	1	Forms are submitted.

**FACSIMILE TRANSMISSION**

I hereby certify that this correspondence is being facsimile transmitted to the COMMISSIONER FOR PATENTS- CENTRALIZED FAX NO. 703/872-9306 MS: AF, on:

Date: June 13, 2005

By

LILIA OLSEN

sf-1946507

06/14/2005 TLD111 00000039 031952 09992901

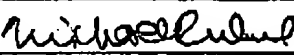
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PTO/SB/17 (12-04)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete If Known	
<b>FEE TRANSMITTAL for FY 2005</b>				Application Number	09/992,901
				Filing Date	November 14, 2001
				First Named Inventor	Michael M. NEFF
				Examiner Name	C. Collins
				Art Unit	1638
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				Attorney Docket No.	532792000610
TOTAL AMOUNT OF PAYMENT		(\$)		225.00	
METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account   Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
FEE CALCULATION					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES					
FILING FEES		SEARCH FEES		EXAMINATION FEES	
Application Type	FEE (\$)	Small Entity Fee (\$)	FEE (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	100
Design	200	100	100	50	65
Plant	200	100	300	150	80
Reissue	300	150	500	250	300
Provisional	200	100	0	0	0
2. EXCESS CLAIM FEES					
Fee Description		Fee (\$)		Small Entity Fee (\$)	
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent		50		25	
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent		200		100	
Multiple dependent claims		360		180	
Total Claims	29	Extra Claims	-41 or HP	Fee (\$)	0
HP + highest number of total claims paid for, if greater than 20		Indep. Claims		3	-3 or HP
Indep. Claims		Extra Claims		Fee (\$)	0
HP + highest number of independent claims paid for, if greater than 3		3		-3 or HP	
3. APPLICATION SIZE FEE					
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or reaction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).					
Total Sheets	- 100 =	Extra Sheets	/ 50 =	Number of each additional 50 or fraction thereof	Fee (\$)
29		- 100 =		0	0
4. OTHER FEE(S)					
Other: EXTENSION OF TIME (2 MONTHS)				\$225.00	
SUBMITTED BY: MORRISON & FOERSTER LLP				CUSTOMER NO. 20872	
Signature				Registration No. (Attorney/Agent)	38,651
Name (Print/Type)	MICHAEL R. WARD			Telephone	415/268-6237
				Date	June 13, 2005

sf-1946623